RESOLUTION 19-R-07 requesting unclaimed balance of accounts remitted to State Treasurer under Unclaimed Property Act.

WHEREAS, Tennessee Code Annotated Section 66-29-102 and Section 66-29-123, provide that a municipality or county in Tennessee may request payment for the unclaimed balance of funds reported and remitted by or on behalf of the local government and its agencies if it exceeds \$100, less a proportionate share of the cost of administering the program; and,

WHEREAS, the City of Murfreesboro and/or its agencies have remitted accounts to the State of Treasurer in accordance with the Uniform Disposition of Unclaimed Property Act for the report year ending December 31, 2018; and,

WHEREAS, the City of Murfreesboro agrees to meet all of the requirements of Tennessee Code Annotated Section 66-29-101 et seq. and to accept liability for future claims against accounts represented in funds paid to it and to submit an annual report of claims received on these accounts to the State Treasurer by September 1 each year; and,

WHEREAS, it is agreed that the City of Murfreesboro will retain a sufficient amount to insure prompt payment of allowed claims without deduction for administrative costs or service charge and that the balance of funds will be deposited in the City's General Fund.

NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF MURFREESBORO, TENNESSEE, AS FOLLOWS:

SECTION 1. The City of Murfreesboro requests the State Treasurer to pay the unclaimed balance of funds remitted for the 2018 report year to it in accordance with the provisions of Tennessee Code Annotated Section 66-29-121. A list of remittances made by or on behalf of the City and its agencies is attached.

SECTION 2. This Resolution shall be effective immediately upon its passage and adoption, the public welfare and the welfare of the City requiring it.

Passed: May 23 2019

Shane McFarland, Mayor

ATTEST:

City Recorder

APPROVED AS TO FORM:

Adam F(Tucker City Attorney

REMITTANCES FILED BY OR ON BEHALF OF LOCAL GOVERNMENT AND ITS AGENCIES

Name of County/Municipality Mailing Address	P. O. Box 1139 Murfreesboro TN 37133-1139								
					Name of Holder or Agency Submitting Report and Remittance	Holder Identification Number	Amount of Remittance (If Available)	Date of Remittan (If Available)	ce Federal employer tax ID#
					City of Murfreesboro	15830	29415.53	4/27/18	62-6000374
			t derrockens						
I certify that any agencies included	in this request are	chartered under th	is local government.						
615-893-5210									
Phone Number	(Signature)								
Melissa Wright	Finance Director								
Printed Name Date May 6, 2019	(Title)								

This report and accompanying Resolution may be filed with the Unclaimed Property office of the State Treasury Department at any point between the actual remittance of unclaimed accounts and the June 1 eighteen months following.

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